

Please type a plus sign (+) inside this box → +

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION**
(37 CFR 1.63)

Declaration submitted with Initial Filing

Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e) required)

Attorney Docket Number	PC9985A
First Named Inventor	Yoshinobu Hashizume
COMPLETE IF KNOWN	
Application Number	Unassigned
Filing Date	Concurrent herewith
Group Art Unit	Unassigned
Examiner Name	Unassi gned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Aryl or heteroaryl fused imidazole compounds as anti-inflammatory and analgesic agents.

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/241,825	October 19, 2000	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.

Please type a plus sign (+) inside this box → +**DECLARATION ---- Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
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Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named Inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Customer Number or	<input type="checkbox"/> Registered practitioner(s) name/registration number listed below
--	---

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number
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Israel Nissenbaum	27,582	Gregory P. Raymer	36,647
J. Trevor Lumb	28,567	Garth Butterfield	36,997
Lawrence C. Akers	28,587	Alan L. Koller	37,371
Paul H. Ginsburg	28,718	Todd M. Crissey	37,807
James T. Jones	30,561	A. David Joran	37,858
Raymond D. Thompson	30,695	Kristina L. Konstas	37,864
Gregg C. Benson	30,977	Arlene K. Musser	37,895
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Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name (first and middle if any) _____ Family Name or Surname _____

YOSHINOBU HASHIZUME

Inventor's Signature _____ Date _____

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City AICHI-KEN State _____ Zip _____ Country JAPAN

Additional inventors are being named on the _____ a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION - POA FOR UTILITY OR DESIGN, PTO SB 01

Express Mail No. EL446402562US 399

Please type a plus sign (+) inside this box → **DECLARATION****ADDITIONAL INVENTOR(S)****Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
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Inventor's Signature						Date
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Given Name (first and middle [if any])		Family Name or Surname				
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor					
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